NIH Guide for Grants and Contracts

Vol. 15, No. 4, March 28, 1986

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

IN THIS ISSUE:	
Notice Recruitment of Minority Individuals into NIH NRSA Research Training Programs National Institutes of Health Index - NATIONAL INSTITUTES OF HEALTH	1
Notice	
Elimination of Cost Sharing Requirement	
for PHS Research Grants	2
Public Health Service	
Index - PUBLIC HEALTH SERVICE	
Notice	
Cancer Education Grants	2
National Cancer Institute	ر
Index - CANCER	
Notice	
Change in Receipt Date - Request for Application	
Trial of Dietary Intervention in Children with Elevated	
Low Density Lipoprotein Levels	3
National Heart, Lung, and Blood Institute	
Index - HEART, LUNG, AND BLOOD INSTITUTE	
Notice	
Change in Policy for the Renewal of Clinical Investigator	
and Physician Scientist Awards	4
National Heart, Lung, and Blood Institute	
Index - HEART, LUNG, AND BLOOD INSTITUTE	
Announcement	
NIH Program for Developing Treatments for Acquired	
Immunodeficiency Syndrome	5
National Cancer Institute	
National Institute of Allergy and Infectious Diseases	
Index - CANCER	
ALLERGY AND INFECTIOUS DISEASES	

The NIH Guide is published at irregular intervals to announce scientific initiatives and to provide policy and administrative information to individuals and organizations who need to be kept informed of opportunities, requirements, and changes in grants and contracts activities administered by the National Institutes of Health.

Two types of supplements are published by the respective awarding units. Those printed on yellow paper concern contracts: solicitations of sources and announcement of availability of requests for proposals. Those printed on blue paper concern invitations for grant applications in well-defined scientific areas to accomplish specific program purposes.

Have You Moved?

If you present address differs from that shown on the address label, please send your new address to: Grants and Contract Guide Distribution Center, National Institutes of Health, Room B3BN10, Building 31, Bethesda, Maryland 20205, and attach your address label to your letter. Prompt notice of your change of address will prevent your name from being removed from our mailing list.

Page 2 - NIH Guide for Grants and Contracts, V	Vol. 15	, No. 4	, March 28,	1986
--	---------	---------	-------------	------

Announcement The First Independent Research Support and Transition (FIRST) Award (R-29)
Announcement Availability of Request for Cooperative Agreement Applications: RFA- 86-RR-01 - Establishment of a Chimpanzee Breeding and Research Program
 Announcement Availability of Request for Cooperative Agreement Applications: RFA - 86-AG-01 - Alzheimer Disease Patient Registry (ADPR)
 Announcement Availability of Request for Applications: RFA 86-AG-02 - Forecasting Life Expectancy and Active Life Expectancy
Announcement Availability of Request for Cooperative Agreement Applications: RFA - 86-HL-20-H - Bypass Angioplasty Revascularization Investigation (BARI) Clinical Units
Announcement Availability of Request for Applications: RFA 86-HD-04 - Families of Retarded Children and Adults20 National Institute of Child Health and Human Development Index - CHILD HEALTH AND HUMAN DEVELOPMENT

Page 3 -	NIH	Guide f	or (Grants and	Contracts,	Vol.	15,	No.	4,	March 2	8,	1986
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Research Center National Institut National Institut	odeficiency Syndrome (AIDS) s - MH-86-16
Announcement	
	Faculty Development Award
	Lung, and Blood Institute HEART, LUNG, AND BLOOD INSTITUTE
Index -	HEART, LUNG, AND BLOOD INSTITUTE
Announcement	
	onal Research Training Program28
	Lung, and Blood Institute
Index -	HEART, LUNG, AND BLOOD INSTITUTE
Announcement	
	aches to Myocardial Research30
National Heart,	Lung, and Blood Institute
Index -	HEART, LUNG, AND BLOOD INSTITUTE
Announcement	
New Investigator	Research Award - MH-86-1732
National Institut	e of Mental Health
, ,	ouse, and Mental Health Administration
Index -	NATIONAL INSTITUTE OF MENTAL HEALTH
	ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH
	ADMINISTRATION

RECRUITMENT OF MINORITY INDIVIDUALS INTO NIH NRSA RESEARCH TRAINING PROGRAMS

P.T. 22, 44, FF; K.W. 0720005, 1014002

NATIONAL INSTITUTES OF HEALTH

The National Research Service Award (NRSA) program funds the preparation of qualified individuals for careers in biomedical and behavioral research. The primary considerations in evaluating plans for research training are the scientific merit of the proposed program (trainee, sponsor, and content) and the projected needs for laboratory and/or clinical investigators in particular areas of research. Within the framework of this longstanding commitment to excellence and relevance, it is important that attention also be given to recruiting individuals from minority groups that now are underrepresented nationally in the biomedical and behavioral sciences. Toward that end, the National Institutes of Health (NIH) is refining its administrative guidelines for institutional NRSAs (training grants) as follows:

- 1. Application instructions, which always have called for information on plans for the recruitment of trainees, now will include a request for a description of steps to be taken for the recruitment of individuals from underrepresented minority groups. Also, renewal applications for awards made under the new guidelines are to include cumulative information on the subsequent career development of all trainees, including information about their minority status.
- 2. The initial review groups, following their assessment of the quality of training grant applications and assignment of priority scores indicative of perceived scientific merit, now will be asked to take the additional step of commenting on each applicant's plans for attracting minority individuals into productive research careers. The executive secretary will record the sense of these comments in an administrative note within the summary statement. These commentaries will cover accomplishments as well as plans whenever an initial review group is dealing with a renewal application for an award made under the new guidelines.
- 3. The National Advisory Councils/Boards and the NIH staff now will be asked to include the executive secretary's administrative note among the information they consider in their efforts to foster training programs that are of high quality, that are strongly relevant to the NIH mission, and that actively seek candidates from across the full spectrum of eligible individuals.

ELIMINATION OF COST SHARING REQUIREMENT FOR PHS RESEARCH GRANTS

P.T. 34; K.W. 1014002

PUBLIC HEALTH SERVICE

The United States Congress has deleted the cost sharing requirement for PHS research grants. Language requiring such cost sharing had been included in the annual appropriations acts for the Department of Health and Human Services. Since 1966, the Office of the Assistant Secretary for Health, PHS, recently notified PHS agencies that budget periods in effect as of February 3, 1986, will be the last budget periods subject to cost sharing requirements. Existing institutional cost sharing agreements will remain in effect through February 3, 1987.

This change does not apply to programs for which authorizing legislation imposes a cost sharing requirement, e.g., "matching" funds under a construction grant program. In certain instances the program/awarding office may administratively apply a cost sharing requirement (cost participation). The change does not prohibit voluntary cost sharing by a grantee, nor does it affect any requirement for cost sharing on research contracts deemed necessary by the contracting officer.

The PHS is preparing more detailed instructions for awarding agencies. Information of general interest to awardee institutions will be published in the <u>NIH Guide</u> as it becomes available. Please contact the appropriate Grants Management Officer if you have additional questions.

CANCER EDUCATION GRANTS

P.T. 34; K.W. 0403004, 0502000, 0715035

NATIONAL CANCER INSTITUTE

Until further notice the National Cancer Institute has suspended acceptance of new (type 1) or competing continuation (type 2) applications for Cancer Education Grants (R25). This announcement should not be construed as an announcement of either the total or permanent termination of the program.

NOTICE

CHANGE IN RECEIPT DATE - REQUEST FOR APPLICATION

TRIAL OF DIETARY INTERVENTION IN CHILDREN WITH ELEVATED LOW DENSITY LIPOPROTEIN LEVELS

RFA-86-HL-17-P AND 86-HL-19-P

P.T. 34; K.W. 0710095, 0755015, 1010013

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

The National Heart, Lung, and Blood Institute (NHLBI) has established new receipt dates for RFAs announced in the NIH Guide for Grants and Contracts Vol. 15, No. 2, January 31, 1986. The following RFAs are affected by this change:

- 86-HL-17-P--Clinical Centers for a Trial of Dietary Intervention in Children with Elevated Low Density Liproprotein Levels to Assess Feasibility, Acceptability, Efficacy and Safety
- 86-HL-19-P--Coordinating Centers for a Trial of Dietary Intervention in Children with Elevated Low Density Liproprotein Levels to Assess Feasibility, Acceptability, Efficacy and Safety

The new receipt date is May 15, 1986. Letters of intent are requested by April 21; the earliest award date will be December 1, 1986.

Requests for copies of the RFA should be addressed to:

Sue Y.S. Kimm, M.D., M.P.H.
Division of Epidemiology and Clinical Applications
National Heart, Lung, and Blood Institute
Federal Building - Room 6A10
7550 Wisconsin Avenue
Bethesda, Maryland 20892

CHANGE IN POLICY FOR THE RENEWAL OF CLINICAL INVESTIGATOR AND PHYSICIAN SCIENTIST AWARDS

P.T. 34; K.W. 0710030, 0785035, 1014002

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

In May 1985, the National Heart, Lung, and Blood Institute (NHLBI) announced the availability of competitive renewals of Clinical Investigator and Physician Scientist Awards (NIH Guide for Grants and Contracts, Vol. 14, No. 6, May 24, 1985). Subsequently, experience has demonstrated that the initial 5-year period of support provided by the awards is sufficient for the development of awardees into independent investigators.

Therefore, the NHLBI will no longer accept applications for competitive renewals of the Clinical Investigator or Physician Scientist Awards.

For further information, contact the following NHLBI program staff:

Fann Harding, Ph.D. Division of Blood Diseases and Resources National Heart, Lung, and Blood Institute Federal Building - Room 5A08 Bethesda, Maryland 20892

Telephone: (301) 496-1817

Max A. Heinrich, Jr., Ph.D. Division of Heart and Vascular Diseases National Heart, Lung, and Blood Institute Federal Building - Room 3A12 Bethesda, Maryland 20892

Telephone: (301) 496-1724

Joan Wolle, Ph.D. Division of Lung Diseases National Heart, Lung, and Blood Institute Westwood Building - Room 612A Bethesda, Maryland 20892

NIH PROGRAM FOR DEVELOPING TREATMENTS FOR ACQUIRED IMMUNO-DEFICIENCY SYNDROME

P.T. 36; K.W. 0740020, 0740025, 0715120, 0780000

NATIONAL CANCER INSTITUTE
NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

The National Cancer Institute (NCI) and the National Institute of Allergy and Infectious Diseases (NIAID) of the National Institutes of Health (NIH, Bethesda, Maryland, have jointly organized an AIDS Drug Selection Committee to review and facilitate the development (testing) of possible treatments for AIDS. This committee is constituted to review suggestions submitted for AIDS treatment and, in certain cases, to recommend appropriate pre-clinical and clinical research or further development. Interested parties who have synthetic or natural substances known to inhibit the growth of the retrovirus known to cause AIDS, or which may preserve or augment the immune status of infected persons, are encouraged to share this information. The Committee will consider information of a proprietary nature in the strictest confidence. Detailed proposals should contain the following information:

- 1. The precise nature and composition of the substance or, if proprietary, a willingness to reveal that information to a closed session of the AIDS Drug Selection Committee.
- 2. Data regarding the substance's or substances' known biological, chemical, physical or physiological properties.
- 3. Data regarding the <u>in vitro</u> activity of the substance or substances such as to suggest that it might be active against the virus associated with AIDS, or to function as an immunomodulator.
- 4. Data from animal studies, if any, indicating its safety, tolerance, and efficacy in conditions possessing some similarities to AIDS.
- 5. Data from human studies, if any, indicating its safety and tolerance.
- 6. A statement of willingness, if any, by an organization to supply material or to cooperate in the preparation of adequate amounts of material for study purposes.

Proposals should be submitted in writing to:

Eddie Reed, M.D. Executive Secretary AIDS Drug Selection Committee Building 31 - Room 3A49 9000 Rockville Pike National Institutes of Health Bethesda, Maryland 20892

THE FIRST INDEPENDENT RESEARCH SUPPORT AND TRANSITION (FIRST) AWARD (R-29)

P.T. 34; K.W. 0710030, 0404000, 1014002

NATIONAL INSTITUTES OF HEALTH HEALTH RESOURCES AND SERVICES ADMINISTRATION

I. DESCRIPTION

The National Institutes of Health (NIH) is replacing its present New Investigator Research Award (R-23) with a new mechanism: the First Independent Research Support and Transition (FIRST) Award (R-29). The NIH will phase out the R-23 Award as presently funded awards terminate and will accept no new R-23 applications for review. The Division of Nursing, Bureau of Health Professions Resources (BHPR), Health Resources and Services Administration (HRSA), will do the same.

II. OBJECTIVE

The objective of this new award is to provide a sufficient initial period of research support for newly independent biomedical investigators to develop their research capabilities and demonstrate the merit of their research ideas. These grants are intended to underwrite the first independent investigative efforts of an individual; to provide a reasonable opportunity for him/her to demonstrate creativity, productivity, and further promise; and to help effect a transition toward the traditional types of NIH research project grants. FIRST awards generally will provide funds for five years during which time the newly independent investigator with a promising, meritorious proposal can provide evidence of significant and innovative contributions to laboratory or clinical science disciplines in biomedical research.

III. GENERAL FEATURES

- A. FIRST awards are not renewable after the five-year period.
- B. The total direct cost award for the five-year period may not exceed \$350,000. The direct cost award in any budget period should not exceed \$100,000. Indirect costs will be paid to the awardee institution in accord with applicable policy of the Department of Health and Human Services (DHHS).
- C. The authority to carry over unobligated direct cost funds from one budget period to the subsequent one under certain conditions will be a feature of this award. Where appropriate such carryover will not be subject to prior approval of the awarding unit nor will it be included in the Institutional Prior Approval System requirements. The procedures for activating this feature will be provided by the awarding unit at the time of the initial grant.

Vol. 15, No.4, March 28, 1986

D. Grantee institutions may extend the final budget period of a FIRST project one time for up to one year without additional funds, unless otherwise restricted by a condition of the award. Such an extension may be made only when additional time beyond the established expiration date is required to assure adequate completion of the originally approved project scope or objectives.

The fact that funds will remain at the expiration of the original project period is not in itself sufficient justification for an extension. The procedures for effecting such extensions will be provided by the awarding unit at the time of the initial award.

- E. Only domestic organizations and institutions are eligible to receive FIRST awards.
- F. The principal investigator must make a commitment of time and effort to the project of at least 50% in each budget period.
- G. An individual may submit only one FIRST award application for any particular receipt date and may not submit concurrently any other type of research grant application.
- H. Applications (exclusive of appendices, reprints, letters of recommendations and the required additional information for those projects involving human subjects or vertebrate animals) exceeding the 20-page limitation will be returned.

If appendix material is submitted, three collated sets must be included with the application package. Identify each of the three sets with the name of the principal investigator and the project title.

- I. A FIRST award may not be used to supplement a project already supported by other PHS funds.
- J. As the FIRST award approaches termination, the principal investigator may submit a traditional research grant application to continue and extend the research activity.
- K. Replacement of the principal investigator on a FIRST award will not be approved.
- L. Except as indicated above, all relevant portions of the PHS Grant Policy Statement are applicable to these awards.
- M. In exceptional cases, New Investigator Research Award applications which are awaiting a funding decision may be considered by individual awarding units for conversion to the new FIRST awards. Principal investigators holding New Investigator Research Awards (R-23s) that still are in the early part of their project period may submit competitive supplement requests for conversion to a FIRST award.

IV. REVIEW CRITERIA

Review criteria and procedures are based on the regular NIH system of dual peer review: evaluation for scientific and technical merit by an initial review group (study section) followed by a recommendation of the cognizant national advisory council or board.

Letters of reference, although not required, are particularly valuable where the investigator's research originality and potential for independent investigation are not reflected in his/her research experience.

V. ELIGIBILITY

To be eligible for this award the principal investigator must be a beginning investigator who is not in training status at the time the award will begin, and who has not been designated previously as principal investigator on any PHS-supported research project that was peer-reviewed. (Exception: serving as principal investigator of a PHS small grant (R-03) or of a current R-23 award in early stages of support does not preclude eligibility.) Potential applicants in these categories are urged to communicate with the appropriate contact person (listed at the end of this announcement) prior to submitting a FIRST application.

VI. IMPLEMENTATION

All awarding units of the NIH are authorized to use this mechanism, as is the Division of Nursing, BHPR/HRSA.

VII. HOW TO APPLY

- A. Applicants must utilize the PHS-398 application form and must provide relevant information on eligibility (see V, above). The acronym "FIRST" should be indicated on the face page of the application.
- B. Applications must be submitted to the Division of Research Grants (DRG) in accord with regular receipt dates (February 1, June 1, and October 1).

The following table indicates the review and award cycle:

Application Receipt Dates	Initial Review Group Dates	National Advisory Council/Board Dates	Earliest Possible Beginning Date		
February 1	May/June	September/October	December 1		
June 1	Oct/Nov	January/February	April 1		
October 1	February/March	May/June	July 1		

C. The first receipt date for applications for this award will be June 1, 1986.

Vol. 15, No.4, March 28, 1986

VIII. PARTICIPATING BUREAUS, INSTITUTES, DIVISIONS AND CENTERS OF THE NATIONAL INSTITUTES OF HEALTH

National Institute of Child Health and Human Development (NICHD)

Areas of special emphasis or interest: Research relating to: reproduction; fertility-infertility; contraceptive development; demographic and behavioral population sciences; genetics and teratology; pregnancy and perinatology; infancy, childhood and adolescence; endocrinology, nutrition and growth; mental retardation and developmental disabilities; behavioral development; learning and cognitive development. Additional information may be obtained from:

Dr. Duane Alexander, Director National Institute of Child Health and Human Development Building 31, Room 2A04 National Institutes of Health Bethesda, MD 20892 (301) 496-1848

National Library of Medicine (NLM)

Areas of special emphasis or interest: Medical Knowledge Representation; Expert Systems; Medical Decision Analysis; Medical Knowledge Management; Organization, Retrieval, Delivery of Information. Additional information may be obtained from:

Mr. Peter A. Clepper, Program Officer Biomedical Information Support Branch Extramural Programs, Room 5S-518 National Library of Medicine Bethesda, MD 20894 (301) 496-4221

National Institute of Environmental Health Sciences (NIEHS)

Areas of special emphasis or interest: Toxicology of environmental pollutants, including pulmonary effects of all pollutants; immunologic, endocrinologic and neurologic effects of toxic chemicals; studies of mutagenic effects of xenobiotics; epidemiologic studies of environmental pollutants; toxicology of aluminum; studies using non-mammalian methods for assessment of xenobiotic toxicity; toxicology of xenobiotics in special populations such as: aged, diseased, infant, maternal, asthmatics, etc. Additional information may be obtained from:

Dr. Edward Gardner, Science Administrator Extramural Programs, NIEHS P.O. Box 12233 Research Triangle Park, North Carolina 27709 (919) 541-7724

National Institute of Dental Research (NIDR)

Areas of special emphasis or interest: All research programs of the Institute. Additional information may be obtained from:

Dr. Marie U. Nylen, Director Extramural Programs National Institute of Dental Research Westwood Building, Room 503 National Institutes of Health Bethesda, MD 20892 (301) 496-7723

National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases (NIADDK)

Areas of special emphasis or interest: All research programs of the Institute. Additional information may be obtained from:

Dr. Walter S. Stolz, Director Division of Extramural Activities National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases Westwood Building, Room 657 National Institutes of Health Bethesda, MD 20982 (301) 496-7277

National Institute of General Medical Sciences (NIGMS)

Areas of special emphasis or interest: All research programs of the Institute. Additional information may be obtained from:

Dr. David Wolff, Deputy Associate Director Office of Program Activities National Institute of General Medical Sciences Westwood Building, Room 955 National Institutes of Health Bethesda, MD 20892 (301) 496-7063

National Heart, Lung and Blood Institute (NHLBI)

Areas of special emphasis or interest: All research programs of the Institute. Additional information may be obtained from:

Dr. Henry G. Roscoe, Acting Director Division of Extramural Affairs National Heart, Lung and Blood Institute Westwood Building, Room 7A17 Bethesda, MD 20892 (301) 496-7723 Vol. 15, No.4, March 28, 1986

National Institute of Neurological and Communicative Disorders and Stroke (NINCDS)

Areas of special emphasis or interest: All research programs of the Institute. Additional information may be obtained from:

Dr. Donald H. Luecke, Deputy Director
Extramural Activities Program
National Institute of Neurological and Communicative Disorders and Stroke
Federal Building, Room 1016
National Institutes of Health
Bethesda, MD 20892
(301) 496-4188

National Institute of Allergy and Infectious Diseases (NIAID)

Areas of special emphasis or enterest: All research programs of the Institute. Additional information may be obtained from:

Dr. Luz A. Froehlich. Deputy Director Extramural Activities Program National Institute of Allergy and Infectious Diseases National Institutes of Health Westwood Building, Room 703 Bethesda, MD 20892 (301) 496-7688

National Cancer Institute (NCI)

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Areas of special emphasis or interest: All research programs of the Institute. Additional information may be obtained from:

Mr. Herman Fox, Referral Officer National Cancer Institute Westwood Building, Room 828 National Institutes of Health Bethesda, MD 20892 (301) 496-3428

National Eye Institute (NEI)

Areas of special emphasis or interest: All research programs of the Institute. Additional information may be obtained from:

Dr. Israel A. Goldberg, Deputy Associate Director National Eye Institute Building 31, Room 6A51 National Institutes of Health Bethesda, MD 20892 (301) 496-5983 National Institute on Aging

Areas of special emphasis or interest: All research programs of the Institute. Additional information may be obtained from:

Dr. Alan L. Pinkerson, Acting Associate Director Office of Extramural Affairs National Institute on Aging Building 31, Room 5C05 National Institutes of Health Bethesda, MD 20892 (301) 496-9374

Division of Research Resources (DRR)

Areas of special emphasis or interest: All research programs of the Division. Additional information may be obtained from:

Dr. James F. O'Donnell, Deputy Director Division of Research Resources Building 31, Room 5B03 National Institutes of Health Bethesda, MD 20892 (301) 496-6023

National Center for Nursing Research (NCNR)

Areas of special emphasis or interest: All research areas pertinent to nursing. Additional information may be obtained from:

Dr. Doris Bloch, Acting Chief Extramural Research Center for Nursing Research Division of Nursing, BHPR, HRSA Parklawn Building, Room 5C09 5600 Fishers Lane Rockville, MD 20857 (301) 443-6315

AVAILABILITY OF REQUEST FOR COOPERATIVE AGREEMENT: RFA

86-RR-01

ESTABLISHMENT OF A CHIMPANZEE BREEDING AND RESEARCH PROGRAM

P.T. 34; K.W. 1002002, 0201058

DIVISION OF RESEARCH RESOURCES

Application Receipt Date: May 15, 1986

The National Institute of Health (NIH) Division of Research Resources (DRR) is soliciting applications for RFA 86-RR-01, entitled "Establishment of a Chimpanzee Breeding and Research Program."

DRR is seeking to assure a stable, long-term national breeding resource of chimpanzees that are critically needed in the United States biomedical research and testing program. In the absence of establishing such a program, the possibility that this species will continue to be available for use in sufficient numbers and desired health status in critical research programs, such as the current program for testing candidate vaccines for AIDS, is remote. The program will provide assistance for maintaining 250 breeding chimpanzees of known health and reproductive fitness and for conducting research on chimpanzees' health, productivity, and well being.

DRR is proposing to support breeding projects at four or more qualified institutions uing awards for cooperative agreements and to support up to five investigator initiated research projects in relevant areas using grant awards. Chimpanzees considered to be in excess of needs for maintaining the breeding population will be made available for priority research or other appropriate uses. Institutions eligible to receive PHS awards through cooperative agreements and grants may apply. The receipt date for applications is May 15, 1986.

The full RFA and further information can be obtained from:

Animal Resources Program
Division of Research Resources
Building 21 - Room 5B59
National Institutes of Health
Bethesda, Maryland 20892

AVAILABILITY OF REQUEST FOR COOPERATIVE AGREEMENT APPLICATIONS: RFA 86-AG 01

ALZHEIMER DISEASE PATIENT REGISTRY (ADPR)

P.T. 34, 36; K.W. 0715180, 0745020, 0785055, 0755015, 0411005, 0710030, 0414000, 0745055

NATIONAL INSTITUTE ON AGING

Application Receipt Date: May 28, 1986

I. BACKGROUND

The overall goal of this solicitation is to foster the development of a model for an Alzheimer Disease Patient Registry (ADPR) which eventually will serve as a national resource for clinical and epidemiological studies related to dementias of old age. In addition to collecting epidemiological data about the incidence of Alzheimer disease (AD), the resources of the ADPR may be used for training personnel in the collection of such data. The National Institute on Aging (NIA) supports a broad spectrum of basic and clinical research related to AD and other dementias of old age. A substantial portion of the NIA support for AD is provided through the program project mechanism and the ten Alzheimer Disease Research Centers (ADRC). The Centers, as well as many program projects, have three common resources: a) clinical expertise and technical means for diagnosis, b) biostatistical knowledge and computer facilities for gathering, storing and analyzing clinical information, and c) neuropathology expertise for postmortem confirmation of diagnosis. This request for applications (RFA) is intended to encourage the development of projects which would build upon existing clinical data resources (e.g. ADRC, or other currently funded projects) and expand these to include information for epidemiological studies.

II. RESEARCH GOALS AND SCOPE

The main emphasis of proposals responding to this request should be on developing plans for a clinical data base and a management system which can serve as a prototype for a national clinical and statistical data resource. A university medical center, a school of public health or a consortium of cooperating institutions may

This program is described in the Catalog of Federal Domestic Assistance, No. 13. 866, Aging Research. Awards will be made under the authority of the Public Health Service Act, Title III, Section 301 (Public Law 78-410, as amended; 42 USC 241) and administered under PHS grant policies and Federal Regulations 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to the intergovernmental review requirements of Executive Order 12372 or Health Systems Agency review.

propose to work together in developing a plan and in coordinating and carrying out all the necessary phases of developing the patient registry. The applicant(s) should have expertise in epidemiology of AD and in the development of disease registries. In addition, they should have access to, or be willing to, collaborate with, those who have access to a large patient population representative of diverse ethnic backgrounds. The ADPR should be planned and designed with two future objectives in mind: a) a data base which will allow testing of specific hypotheses concerning etiology or risk factors of the dementias, and b) a clinical information system which will facilitate clinical trials.

In developing their proposals, applicants should propose a set of criteria for the diagnosis of AD and discuss the relationship of these criteria to other criteria currently in use. This discussion should include a theoretical justification; estimates of sensitivity, specificity, and reliability; and a description of the degree to which these criteria can be applied comprehensively and equitably to any population. Applicants should propose plans for utilization of ADPR data in future The ascertainment criteria should incorporate measures that may substantially improve the sensitivity and specificity of current measures. These criteria should be reasonably simple, economic, and easily and readily applied for mass use. To achieve the principal objective of this solicitation, applicants may propose studies in such areas as: a) developing markers for early detection of AD, b) evaluating and refining diagnostic criteria for AD, c) standardizing and validating screening instruments and diagnostic tests, d) developing more sensitive and specific diagnostic screening instruments, e) developing and improving research designs of epidemiological and longitudinal studies, f) identifying well-defined populations that can provide statistical information about incidence of dementias, g) creating a clinical data base for longitudinal studies designed to assess risk factors or test hypotheses concerning etiology of the dementias. This list is not intended to be inclusive; applicants may propose any other studies that might be important for accomplishing the overall goals of this RFA.

III. MECHANISM OF SUPPORT

Awards will be made as Cooperative Agreements. These are assistance relationships which reflect substantial involvement by NIA staff during performance of the project. Cooperative agreements resulting from this RFA will be subject to the same administrative requirements pertaining to all assistance awards of the U.S. Public Health Service. The terms and conditions of NIA staff involvement are included in the complete RFA. It is anticipated that not more than four awards will be made as a result of this competition. Awards will be made for project periods of three years. Up to \$2.3 million will be available for this program through FY 1989. The number of grants and the specific amount of awards will depend on the merit and scope of the applications received and the availability of funds.

Timetable:

Application receipt date:
Scientific merit review:
National Advisory Council on Aging:
Anticipated award date:

May 28, 1986 August 1986 September 1986 September 1986

IV. INQUIRIES

A copy of the complete RFA which provides background information, research goals and scope, terms and conditions, review procedures and criteria, and method of applying may be obtained by contacting the NIA program director:

Zaven S. Khachaturian, Ph.D. Chief, Physiology of Aging Branch National Institute on Aging/NIH Building 31 - Room 5C27 Bethesda, Maryland 20892

AVAILABILITY OF REQUEST FOR APPLICATIONS: RFA

86-AG-02

FORECASTING LIFE EXPECTANCY AND ACTIVE LIFE EXPECTANCY

P.T. 34; K.W. 0710010, 0413001, 0404007, 1010013

NATIONAL INSTITUTE ON AGING

Application Receipt Date: September 25, 1986

I. BACKGROUND

The continuing increase in longevity in the United States has brought with it a number of questions about the future size, composition, and expected quality of life of the elderly population. Little is known about the changes in morbidity and disability brought about by the reduction of mortality at advanced ages. expected changes in the incidence of these and other chronic conditions will have an impact on the future needs for medical care and other services for the elderly. Over the past two decades population projections have consistently underestimated the growth of the elderly population, particularly the age 85 and older group. In order to foster effective planning for the resources for the elderly in the future and to provide a basis against which to evaluate interventions, accurate forecasts of both life expectancy and what has been termed "active life expectancy" are needed. The standard methods for estimating life expectancy do not take into account predictable changes in mortality nor alternative assumptions concerning Many methods handle uncertainty in a rudimentary fashion. future mortality. Methods for projecting active life expectancy that take into account expected morbidity and disability are lacking. New methods are needed to deal with these issues, to solve a number of associated measurement problems, and to handle the complex interactions of competing risks of various diseases and the disabilities, morbidity, and mortality they cause.

II. RESEARCH GOALS AND SCOPE

This RFA solicits research on the development of methods and models for improving forecasts of life expectancy and active life expectancy within the elderly population. The application of this research to the problems of the oldest old (age 85 and older) is encouraged as is interdisciplinary collaboration. Illustrative examples of research areas covered by this RFA are: 1) the development and evaluation of methods for forecasting life expectancy, comparison of mathematical models of general and cause specific mortality and morbidity at advanced ages, methods for dealing statistically with the problem of competing causes of mortality, approaches to assessing the uncertainty of projections, measurement problems, experimentation with various axes of disaggregation, and analysis of observed and unobserved heterogeneity; 2) the assessment of competing causes of mortality and morbidity; and 3) research on the evolving concept of active life expectancy including analyses of transitions between states of

independence and dependence, projection of factors associated with the maintenance of independent living, and development of models for forecasting active life expectancy that take into account such factors as the changing nature of technology and of cohorts reaching advanced ages.

III. MECHANISMS OF SUPPORT

The administrative and funding mechanism to be used to support the studies carried out under this RFA will be the Research Project Award. The regulations (Code of Federal Regulations, Title 42, Part 52 and Title 45, Part 74) and policies that govern the research grant programs of the Public Health Service will prevail. This RFA is a one time invitation. The duration of proposed projects may be up to five years. The start date for funded program projects will be approximately July 1, 1987. A total of \$750,000 will be allocated to fund the first year awards, with the actual number of the awards dependent upon the scope and quality of the approved projects. Grant applications will be reviewed as a single competion by an initial review group convened by the NIA Scientific Review Office.

IV. INQUIRIES

A copy of the complete RFA describing the research goals and scope, the review criteria and the method of applying can be obtained by contacting:

Richard Suzman, Ph.D. National Institute on Aging National Institutes of Health Building 31 - Room 4C-32 Bethesda, Maryland 20892

Telephone: (301) 496-3136

Inquiries concerning this announcement are encouraged and should be directed to Dr. Suzman at the above address and phone number.

AVAILABILITY OF REQUEST FOR COOPERATIVE AGREEMENT APPLICATIONS: RFA 86-HL-20-H

BYPASS ANGIOPLASTY REVASCULARIZATION INVESTIGATION (BARI) CLINICAL UNITS

P.T. 34; K.W. 0755015, 0785210, 0715040, 0785025

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Application Receipt Date: July 15, 1986

The Division of Heart and Vascular Diseases, National Heart, Lung, and Blood Institute (NHLBI), announces the availability of a request for applications (RFA) on the above program.

The Division invites applications for Clinical Units to participate with NHLBI in the design and performance of a collaborative randomized clinical trial to assess the relative efficacy of percutaneous transluminal coronary angioplasty and coronary artery bypass graft surgery in patients who require invasive therapy and have coronary anatomy suitable for either procedure. The program will include randomized studies in well-defined subsets of patients with symptomatically severe coronary artery disease. The cooperative agreement, an assistance mechanism, will be used to support this study. It is anticipated that as many as 12 Clinical Units will participate in BARI, subject to the availability of funds. The proposed program will support the Clinical Units for a period of seven years and three months. Among the disciplines and skills appropriate for this research program are those of Cardiology, Cardiovascular Surgery, Coronary Angiography, Coronary Angioplasty, and Clinical Trials.

Requests for copies of the RFA should be addressed to the following individual. The RFA will be released on April 1, 1986.

Dr. Charles G. Hollingsworth Cardiac Diseases Branch Federal Building - 3C06 7550 Wisconsin Avenue Bethesda, Maryland 20892

AVAILABILITY OF REQUEST FOR APPLICATIONS: RFA

HD-86-04

FAMILIES OF RETARDED CHILDREN AND ADULTS

P.T. 34; K.W. 0715130, 0730010, 0404000, 0404021

NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT

Application Receipt Date: July 15, 1986

The Mental Retardation and Developmental Disabilities Branch (MRDD), Center for Research for Mothers and Children (CRMC), National Institute of Child Health and Human Development (NICHD) supports basic, clinical and applied biomedical, social and behavioral science research in mental retardation and related aspects of human development.

In recent years, there has been a trend toward deinstitutionalization of mentally retarded children and adults. In general, how families have coped with having their retarded children living with them is not well understood. The mutual impact of mentally retarded children on their families and of families on their mentally retarded children is an important topic for scientific study. Knowledge gained from such studies may lead to the provision of support services to families with retarded and handicapped youngsters living with them.

This RFA invites scientists to submit grant applications for research on the impact of retarded children and adults on their families and on the impact of family structure and process on the retarded children and adults living with their families.

I. OBJECTIVE AND SCOPE

This RFA invites scientists to submit grant applications for research on families with mentally retarded members. Applicants should focus their research of the impact of a retarded person on family structure, function or process or they should focus on the influence of these three domains on the mentally retarded individual.

This program is described in the Catalog of Federal Domestic Assistance No. 13.865, Research for Mothers and Children. Awards will be made under the authority of the Public Health Service Act, Section 301 (Public Law 78-410, as amended; 42 USC 241) and administered under PHS grant policies and Federal Regulations 42 CFR Part 42 and 45 CFR Part 74. This program is not subject to intergovernmental review requirements of Executive Order 12372 or Health Systems Agency review.

Of particular interest are studies on family process and interaction, the ways in which different family members interact with the mentally retarded member, and how such interactions are facilitated or hampered. Research should be focused on fathers and siblings as well as on mothers of retarded persons. There is also interest in extended family members especially as they impact on the social support networks of families.

In addition to research on intra-family processes, there is also interest in supporting research on relationships between families and community resources including service providers, friends, neighbors and extra-family agencies with which the family with a retarded member may have commerce. Of special relevance are studies which focus on the strengths of families with mentally retarded members.

All relevant research methodologies are of interest. These include ethnographic and observational methods as well as standardized scales and questionnaires.

II. MECHANISM OF SUPPORT

Support mechanisms for this program will include both the individual research project grant (R01) and the First Independent Research Support and Transition (FIRST) Award.

III. ESTIMATED NUMBER OF AWARDS

It is anticipated that up to five grants will be awarded depending on the overall merit of the applications and available funds.

IV. WHERE COMPLETE RFA MAY BE OBTAINED

A complete RFA entitled "Families of Retarded Children and Adults" may be obtained from:

Peter M. Vietze, Ph.D.

Mental Retardation and Developmental
Disabilities Branch
National Institute of Child Health
and Human Development
Landow Building - Room 7C-09
Bethesda, Maryland 20892

ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) RESEARCH CENTERS

MH-86-16

P.T. 04; K.W. 0715120, 0715095, 0404009, 0785055

NATIONAL INSTITUTE OF MENTAL HEALTH NATIONAL INSTITUTE ON DRUG ABUSE ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

I. PURPOSE

The Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) is interested in establishing AIDS Research Centers (AIDS/RC) to provide support for coordinated, multidisciplinary research programs on the mental health and drug abuse aspects of AIDS, ARC, and HTLV-III infection.

II. PROGRAM SPECIFICATIONS

AIDS/RC support may be requested for up to five years. The overall aims of the center must be clearly defined for the requested period of support. Areas of future development should be indicated and justified.

A center is expected to provide an environment in which investigators can pursue basic, clinical, and applied research on mental health and drug abuse aspects of AIDS, ARC, and HTLV-III infection. Priority will be given to centers which address both mental health and drug abuse aspects of AIDS, although applications focusing primarily on one or the other will be considered. Investigators are also encouraged to include measures of alcohol use and abuse to the extent possible. Such research may deal with problems of etiology, epidemiology, assessment, mechanisms, course, treatment, prevention, and service delivery issues. A center should encourage hypothesis testing and systematic investigation in the context of both pilot and more comprehensive studies. The focus should be multidisciplinary, involving at least two disciplines, such as psychology and immunology.

Although an AIDS/RC is intended to cover many aspects of AIDS research, special emphasis in a particular area is encouraged. For example, one center might emphasize the epidemiology of mental health and drug abuse problems among AIDS, ARC, and HTLV-III infected persons. A second center might focus on the neuropsychological aspects of brain and behavior changes associated with AIDS and related disorders. A third might concentrate on prevention, intervention strategies, behavior change, health service delivery, or public education strategies related to this area.

The principal investigator must serve as director of the center and provide scientific leadership by devoting at least 50 percent of his/her time to the center. The director should be an experienced investigator who has made contributions to health, public health, drug abuse, or mental health research. He/she should possess appropriate administrative skills and be capable of assuring the highest standards of investigation, treatment, and care.

Vol. 15, No.4, March 28, 1986

A center is expected to have an administrative structure that will facilitate coordination among center personnel and promote efficiency of operation and sound financial practices. The center director is responsible for the planning and coordination of the center program, preparation of the budget, control of expenditure, staff appointments, and space allocation. The center director should have sufficient authority to establish the necessary administrative and management procedures to operate an efficient center. Day-to-day management may be delegated. Another individual may be designated to be responsible for the administrative and operational aspects of the center.

The AIDS/RC applicant institution must have a facility with research capability and appropriate laboratory resources. Each center should have access, preferably through existing programs, to sufficient inpatient and/or outpatient facilities for AIDS, ARC, and HTLV-III infected patients and, if appropriate, to relevant at-risk community settings and populations. The characteristics of subject populations will vary, depending upon the research interests and requirements of the investigators associated with the center.

A center is expected to establish methods for coordinating and integrating the center activities with other facilities of the applicant institution and the scientific, clinical, and local community. The center's access to training facilities, liaison with other departments within the applicant institution, and position of clinical and scientific excellence in the surrounding community must be demonstrated.

III. ELIGIBILITY

Eligible applicant institutions include any nonprofit or for-profit organization which has an established relevant research capacity or has a documented affiliation with an institution with such a research capacity.

A. Review Criteria

Criteria for scientific/technical merit of the center applications will include the following:

- o potential contribution to mental health, substance abuse, and public health knowledge
- o scientific and technical merit, including significance and innovativeness, of the proposed research program
- o level of training, experience, competence, and productivity of research personnel
- o level of training, experience, productivity, commitment, and authority of the center director (principal investigator)
- o staff balance and synergistic potential for collaboration and cooperation among investigators from various disciplines

- o availability of sufficient number and kinds of research subjects and materials for study
- o capacity of the proposed center to provide a variety of quality preceptorship and research training opportunities
- o adequacy of facilities and general environment for conduct of the proposed research program
- o extent of institutional support and commitment
- o adequacy of the center's administrative staff, management systems, and organizational structure
- o potential for the proposed research center to become a regional or national resource
- o appropriate plans for information dissemination to a broad range of relevant audiences
- o appropriateness of budget estimates for proposed center activities

IV. AWARD CRITERIA

Priority will be given to applications which emphasize both mental health and drug abuse aspects. In the decision to fund applications, the following will also be considered:

- o quality of the proposed center as determined during the review process
- o availability of funds
- o program balance
- o geographic distribution

V. RECEIPT AND REVIEW SCHEDULE

Applications in response to this announcement should be submitted by May 1, 1986, for funding consideration in Fiscal Year 1986.

Receipt of	Initial	Advisory	Earliest		
Applications	Review	Council Review	Award Date		
May 1, 1986	July 1986	September 1986	September 1986		
October 1, 1986	Feb/March 1987	May 1987	July 1, 1987		

VI. AVAILABILITY OF FUNDS

In Fiscal Year 1986 and 1987, NIMH and NIDA anticipate funding two-three research centers at amounts up to \$500,000 each in direct costs.

Vol. 15, No.4, March 28, 1986

VII. ADDITIONAL INFORMATION

For information concerning application procedures and terms and conditions of support and for a copy of the complete announcement, applicants should contact ADAMHA staff:

Ellen Simon Stover, Ph.D. or Deputy Director Division of Basic Sciences National Institutes of Mental Health Parklawn Building - Room 11-103 5600 Fishers Lane Rockville, Maryland 20857

Telephone: (301) 443-3563m 443-4337

Roy W. Pickens, Ph.D.
Director
Division of Clinical Research
National Institute on Drug Abuse
Parklawn Building - Room 10A-38
5600 Fishers Lane
Rockville, Maryland 20857

MINORITY SCHOOL FACULTY DEVELOPMENT AWARD

P.T. 14, 34, FF; K.W. 0715040, 0715165, 0785070, 0780000

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Application Receipt Date: August 15, 1986

The National Heart, Lung, and Blood Institute (NHLBI) announces a program to encourage the development of faculty investigators at minority schools in areas relevant to cardiovascular, pulmonary, and hematologic diseases and resources. Copies of the program guidelines are currently available from the staff of the NHLBI, listed below.

Grants in this program will be made to minority institutions on behalf of awardees, each of which will work with a mentor at a nearby (within 100 miles) research center, who is recognized as an accomplished investigator in the research area proposed and who will provide guidance for the awardee's development and research plan.

Guidelines for this program may be obtained from any of the following:

George A. Hayden, Ph.D. Division of Heart and Vascular Diseases National Heart, Lung, and Blood Institute Federal Building - Room 3C03 7550 Wisconsin Avenue Bethesda, Maryland 20205

Telephone: (301) 496-1724

Joan M. Wolle, Ph.D.
Division of Lung Disease
National Heart, Lung, and Blood Institute
Westwood Building - Room 6A12
5333 Westbard Avenue
Bethesda, Maryland 20205

Telephone: (301) 496-7668

or

This program is described in the Catalog of Federal Domestic Assistance Nos.13.837, 13.838, and 13.839. Awards will be made under the authority of the Public Health Service Act, Title III, Section 301 (Public Law 78-410 as amended; 42 USC 241) and administered under PHS grant policies and Federal Regulation 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to the intergovernmental review requirements of Executive Order 12372 or Health Systems Agency review.

NIH GUIDE FOR GRANTS AND CONTRACTS Vol. 15, No.4, March 28, 1986

Luiz Barbosa, D.V.M.
Division of Blood Diseases and Resources
National Heart, Lung, and Blood Institute
Federal Building - Room 5C06
7550 Wisconsin Avenue
Bethesda, Maryland 20205

MINORITY INSTITUTIONAL RESEARCH TRAINING PROGRAM

P.T. 22, 44, FF; K.W. 0720005, 0715040, 0715165, 0785070

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Application Receipt Date: August 15, 1986

The National Heart, Lung and Blood Institute (NHLBI) announces a program to support full time research training for investigative careers at minority schools in areas related to cardiovascular, pulmonary or hematologic diseases. Minority schools seeking this support must have: (1) graduate students, or; (2) health professional students who will take a minimum of one year from his/her professional training, or; (3) postdoctoral students. The support mechanism will be the NIH institutional research training grant. Copies of the program guidelines are currently available from staff of the NHLBI, listed below.

Grants in this program will be made to minority institutions, each of which will cooperate with a research center that has a well-established cardiovascular, pulmonary, or hematologic research and research training program. Each trainee will be placed with a mentor who is an accomplished investigator at the cooperating research center and who will assist the advisor at the minority institution in the trainee's development and research plan.

Guidelines for this program may be obtained from any of the following:

George A. Hayden, Ph.D.
Division of Heart and Vascular Diseases
National Heart, Lung, and Blood Institute
National Institutes of Health
Federal Building - Room 3C03
Bethesda, Maryland 20892

This program is described in the Catalog of Federal Domestic Assistance Nos. 13.837, 13.838, and 13.839. Award will be made under the authority of the Public Health Service Act, Title IV, Section 487; 42 USC 288 and administered under PHS grant policies and Federal Regulations at 42 CFR Part 66. This program is not subject to the intergovernmental review requirements of Executive Order 12372 or Health Systems Agency review.

Joan M. Wolle, Ph.D.
Division of Lung Diseases
National Heart, Lung, and Blood Institute
National Institutes of Health
Westwood Building - Room 6A12
Bethesda, Maryland 20892

Telephone: (301) 496-7668

Luiz Barbosa, D.V.M.
Division of Blood Diseases and Resources
National heart, Lung, and Blood Institute
National Institutes of Health
Federal Building - Room 5C06
Bethesda, Maryland 20892

MOLECULAR APPROACHES TO MYOCARDIAL RESEARCH

P.T. 34; K.W. 0715040, 0705015, 1002008, 1002034, 0765035, 0760030, 0760045, 1002028, 0755040, 0760075, 0760080, 0790000

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

The Division of Heart and Vascular Diseases (DHVD), National Heart, Lung, and Blood Institute (NHLBI) seeks to encourage grant applications utilizing the tools, techniques and approaches of molecular biology to explore, identify, and elucidate the detailed biochemical mechanisms of normal and altered myocardial development and function under various physiological and pathophysiological conditions.

The purpose of this program announcement is to encourage highly qualified investigators to apply molecular techniques to fundamental areas of cardiovascular research. These potentially powerful and productive approaches may include, but are not restricted to, creating hybridomas and producing monoclonal antibodies or using well characterized peptide-directed polyclonal antibodies; employing site-directed mutagenesis for the genetic analysis of structure-function relationships; using recombinant DNA methodologies to manipulate the genome in order to define the number, structure, and organization of genes and the mechanisms regulating their expression, and to create recombinant clones for the production of large amounts of proteins difficult to obtain by conventional procedures.

There are a large number of problems which can be studied at the molecular level, which include, but are not limited to, cardiovascular membrane receptors and ion transport systems, membrane excitability, cardiac contractility, growth and hypertrophy of the heart, cardiovascular neural and hormonal control mechanisms, metabolic regulation, cardiogenesis, and the immunologic aspects of cardiac disease. The goal of this program announcement is to elucidate, at the molecular level, the fundamental mechanisms dictating cardiovascular function, which are perturbed in cardiovascular disease states. The ultimate objective is to develop new approaches for the treatment and prevention of cardiovascular disease.

Application Submission and Review

Application receipt dates are the same as those for new research grant applications (June 1, October 1, 1986; February 1, 1987). The earliest possible award date is approximately nine to ten months after the receipt date. Applicants should use the regular research grant application form PHS 398, which is available at institutional business offices or from the Division of Research Grants (DRG), NIH.

This program is described in the Catalog of Federal Domestic Assistance, No. 13.837, Heart and Vascular Diseases. Awards will be made under the authority of the Public Health Service Act, Title III, Section 301 (Public Law 78-410, as amended; 42 USC 241) and administered under PHS grant policies and Federal regulations 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to the intergovernmental review requirements of Executive Order 12372, or Health Systems Agency review.

Vol. 15, No.4, March 28, 1986

To identify responses to this announcement, check "yes" and put "Molecular Approaches to Myocardial Research" under item 2 of page 1. Send or deliver the completed application and six (6) signed, exact photocopies of it to:

Division of Research Grants National Institutes of Health Westwood Building - Room 240 5333 Westbard Avenue Bethesda, Maryland 20892

Applications will be reviewed by Study Section as assigned by the Division of Research Grants. NHLBI Advisory Council will review Study Section recommendations in the same manner as for other competing investigator initiated applications.

Inquiries

Stephen C. Mockrin, Ph.D.
Cardiac Functions Branch
Division of Heart and Vascular Diseases
National Heart, Lung, and Blood Institute
National Institutes of Health
Federal Building - Room 304
Bethesda, Maryland 20892

NEW INVESTIGATOR RESEARCH AWARD

MH-86-17

P.T. 34; K.W. 0745055, 0715020, 0730050, 0715095, 0411005

NATIONAL INSTITUTE OF MENTAL HEALTH

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

I. PURPOSE

The National Institute of Mental Health (NIMH) seeks applications for the New Investigator Research Award (NIRA) in the areas of Prevention and Mental Health Services Research. NIRA is an award to an institution on behalf of a specific individual and is designed to encourage new investigators (or investigators who have established careers in closely related fields) who wish to specialize in the biomedical and biobehavioral disciplines to develop their research interests and capabilities in prevention or mental health services (see pages 2-4). To assist in the transition either from training status to that of established investigator or from a related field, this program provides research grant funds for relatively inexperienced investigators (or investigators refocusing their careers) with meritorious ideas. The award may include up to \$112,500 total direct costs for a three-year period.

NIMH is interested in applications from all well-qualified individuals. Women and minority candidates, in particular, are encouraged to apply.

II. ELIGIBILITY

A. Applicant Institutions

All domestic, nonprofit and for-profit organizations and institutions, qualified entities of State and local governments, and eligible Federal institutions may apply.

B. Principal Investigator

This award is restricted to new investigators or to those who are refocusing their careers in prevention or mental health services research.

C. Concurrent and Subsequent Applications

An individual may submit only one NIRA application for any particular receipt date; also, an individual may not submit concurrently any other career development application or a regular research grant application for a particular receipt date.

Vol. 15, No.4, March 28, 1986

At any time during the course of a NIRA award, the principal investigator may submit regular research grant applications for competitive review. If such proposals overlap with the objectives and activities of the NIRA award, the overlap must be fully explained and justified. As the NIRA award approaches termination, the principal investigator may submit a regular research grant application to continue and extend the research activity.

III. SPECIFIC AREAS OF INTEREST

A. Prevention

The NIMH NIRA Award in Prevention is directed toward investigators who seek to develop their research interests and capabilities in prevention research methodology and preventive intervention research in the mental health field. The long-range goal of this program is to expand the scientific and clinical knowledge base of prevention theory and thereby produce demonstrable reductions in the incidence of mental health disorders and dysfunctions.

Prevention research is defined for this announcement as research focused on, or directly related to, reducing the incidence of: mental health disorders; the high-risk precursors of the disorders; the adverse consequences of high-risk precursors; or early manifestations of the disorders themselves. It includes research on: primary preventive and health-promotion interventions; nonclinical secondary preventive interventions; general population-screening methods for early identification; and the role of contributing and inhibiting factors as a basis for development or refinement of preventive intervention strategies.

NIMH particularly encourages applications in areas which include but are not limited to:

- o the design, implementation, and evaluation of models of early preventive interventions directed toward individuals/populations at risk for mental health disorders and behavior dysfunctions or who display early signs or precursors thereof (Interventions should aim to demonstrably reduce both the incidence of a specific disorder or dysfunction and the need/demand for treatment.)
- o assessment of the differential applicability of preventive interventions for different populations and age groups and the duration of the effects of preventive interventions for different demographic, cultural, ethnic, and age segments of the population
- o refinement of techniques for differentiating within epidemiologically identified at-risk populations those individuals who are vulnerable for specific mental health disorders, and assessment of the receptivity of such individuals to early prevention intervention

- o assessment of the relationship between stressful life events and individual vulnerability and resistance to specific mental health disorders and behavioral dysfunctions, with the intent of applying these research findings directly to the development of preventive interventions
- o development and/or refinement of prevention research and evaluation methods such as instrumentation and measurement techniques, cost-benefit analysis, and community-impact analysis

Further information on the NIMH NIRA Award in Prevention can be obtained from:

Ms. Joyce Lazar, Chief Prevention Research Branch National Institute of Mental Health Parklawn Building - Room 14C-04 5600 Fishers Lane Rockville, Maryland 20857

B. Mental Health Services

The NIMH NIRA Award in Mental Health Services is directed toward mental health services methodology and mental health services research. The long-range goal of this program is to expand the scientific and clinical knowledge base of mental health services theory and thereby produce demonstrable improvements in the effectiveness, especially the cost effectiveness, of mental health services.

Mental health services research is defined for this announcement as research which focuses on the delivery of mental health services at the clinical, institutional, and systems levels. Its aims are to characterize the nature of services provided for mental disorders, to identify the factors that influence the delivery of services, and to evaluate interventions to improve diagnosis and clinical practice. It includes research on the scope, distribution, adequacy, appropriateness, use, cost, organization, management, administration, planning, and evaluation of mental health services.

NIMH particularly encourages applications in areas which include but are not limited to:

- analyses of cost and financing
- o assessment of factors influencing the supply and use of facilities and services
- o general health/mental health service system interactions
- o assessment of the need for treatment
- research that examines clinical management of patients with mental disorders in general medical and specialty mental health settings

o research that examines unique aspects of providing mental health services to population groups with special needs, such as the elderly, children, minorities, and the chronically mentally ill

Further information on the NIMH NIRA Award in Mental Health Services can be obtained from:

Dr. Lawrence Chaitkin
Division of Biometry and Applied Sciences
National Institute of Mental Health
Parklawn Building - Room 18C-06
5600 Fishers Lane
Rockville, Maryland 20857

IV. REVIEW CRITERIA

Applications will undergo peer review for scientific and technical merit by Initial Review Groups (IRGs) consisting primarily of non-Federal technical and scientific experts. Applications will receive a secondary review for scientific and technical merit and policy considerations by the National Advisory Mental Health Council. Only applications recommended for approval by Council can be considered for funding.

Particular attention will be given to the following:

- o adequacy of the principal investigator's research and research-training background as a guide to future development into a creative, independent investigator in the specific research area of interest
- o quality of the individual's past education, scientific training, and potential for a research career in the specific area of interest, or letters of reference if research originality and potential are not reflected in past experience
- o evaluation of the research proposal for scientific merit, including (1) originality, (2) feasibility, (3) adequacy of the design, (4) plans for analysis and evaluation of data, and (5) overall evidence of the investigator's ability to develop a sound research plan
- o adequacy of resources and environment for the successful completion of the proposed research
- o adequacy of provisions for the protection of human subjects and/or for the care and ethical use of animal subjects

For a copy of the complete announcement and further information pertaining to application, special terms and conditions of support, award criteria, and the receipt and review schedule, applicants should contact NIMH staff (as listed above).